

BOROUGH OF MILFORD ZONING CLEARANCE APPLICATION

Date Application Received:	
Block: Lot:	
Applicant Name:	
Property Owner:	
Address:	
Phone:	
Email:	_
TYPE OF PROJECT (PLEASE CIRCLE):	
Fence Shed Pool Deck Addition Sign Ga	rage Generator Ground/Roof Solar
Please describe project, including details such as h	eight, square footage, stories, kW, dimensions, etc.:
With application, submit 1 copy of a survey with survey. Include distance from structure to proper	
Applicant's Signature:	Date:

Application form and survey can be emailed to: milfordzoning2@gmail.com for fastest turnaround time